2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P00000059440

Entity Name: PEECC 3RD ENTERPRISE, INC.

Current Principal Place of Business:

413 SW 9TH CT
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

413 SW 9TH CT
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 65-1010618 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDERSON, CORNELIUS JR
413 SW 9TH CT
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HENDERSON, CORNELIUS JR
Address: 413 SW 9TH COURT
City-St-Zip: DELRAY BEACH, FL 33444

Title: 2 VP ( ) Delete
Name: HENDERSON, PERVIS M 2 VP
Address: 413 SW 9TH COURT
City-St-Zip: DELRAY BEACH, FL 33444

Title: TD ( ) Delete
Name: HENDERSON, EBONY P
Address: 413 SW 9TH COURT
City-St-Zip: DELRAY BEACH, FL 33444

Title: SD ( ) Delete
Name: HENDERSON, III, CORNELIUS
Address: 413 SW 9TH COURT
City-St-Zip: DELRAY BEACH, FL 33444

Title: DIR. ( ) Delete
Name: SAVAGE, CAMERON B DIR.
Address: PSC 473 BOX 242
City-St-Zip: FOP, AP 96349

Title: 1 VP ( ) Delete
Name: HENDERSON, ANDREA N 1ST VP
Address: 413 SW 9TH COURT
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORNELIUS HENDERSON JR. PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date